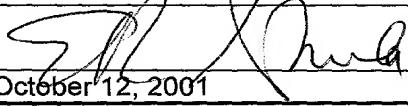


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UTILITY PATENT APPLICATION TRANSMITTAL <small>(only for new nonprovisional applications under 37 CFR 1.63(b))</small>		Attorney Docket No.	HRT-278
		First Inventor	Andrew H. Hancock
		Title	APPARATUS AND METHODS FOR OFF-PUMP CARDIAC SURGERY
		Express Mail Label No.	EL691443594 US
APPLICATION ELEMENTS <small>See MPEP Chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status.		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 19] <small>(Preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies	
ACCOMPANYING APPLICATION PARTS			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)			
11. <input type="checkbox"/> English Translation Document (if applicable)			
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations			
13. <input type="checkbox"/> Preliminary Amendment			
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)			
16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
17. <input type="checkbox"/> Other			
18. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: 09/293,630, filed 04/15/1999. Prior application information: Examiner P. Hirsch Group Art Unit: 3732 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below			
Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA			
20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to E. Richard Skula at: Telephone: (732) 524-2718 Fax: (732) 524-2808			
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	E. Richard Skula		Reg. No. 31061
SIGNATURE			
DATE	October 12, 2001		

10/21/01

EL691443594US

FEE TRANSMITTAL

Complete if Known	
Application Number	
Filing Date	October 12, 2001
First Named Inventor	Hancock
Group Art Unit	3732
Examiner Name	P. Hirsch
Attorney Docket Number	HRT-278

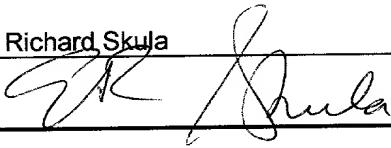
FEE CALCULATION**CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	9 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	4 - 3 =	1	x 80.00	\$ 80.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$ 790.00

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Andrew H. Hancock

For : APPARATUS AND METHODS FOR OFF-PUMP CARDIAC SURGERY

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"Express Mail" mailing number: EL691443594 US

Date of Deposit: October 12, 2001

I hereby certify that this complete Divisional Application, including specification pages, claims, formal drawings, and a copy of the Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

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